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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/517,882	08/17/2005	Michael Lyne	GJE-7477	1606	
	7590 10/02/200 K LLOYD & SALIW		EXAMINER		
A PROFESSIONAL ASSOCIATION			KIM, JENNIFER M		
PO BOX 142950 GAINESVILLE, FL 32614-2950			ART UNIT	PAPER NUMBER	
			1617		
			MAIL DATE	DELIVERY MODE	
			10/02/2008	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/517,882 LYNE, MICHAEL		-
interview Summary	Examiner	Art Unit	
	JENNIFER M. KIM	1617	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>JENNIFER M. KIM</u> .	(3)		
(2) <u>Mr. David Salivanchik</u> .	(4)		
Date of Interview: 25 September 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)∏ applicant's representative	;]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>none</u> .			
Identification of prior art discussed: <u>none</u> .			
Agreement with respect to the claims f)⊠ was reached. g)□ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>The attorney's representation</u> .			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTELE A STATEMENT OF THE SUBSTANCE OF THE INTELE Requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP / DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
/JENNIFER M KIM/ Primary Examiner, Art Unit 1617			
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Application No.

Applicant(s)